

## STUDENT EXPECTATIONS – MSIII

*These are to serve as general expectations for your rotation, developed by our core VA teaching faculty. Individual attendings may have specific additions – please discuss this with them.*

### Daily:

- Arrive early enough to see your patients before rounds, read chart for updates, gather data, discuss A/P with resident or intern
- Carry 2-3 patients
- Present patients on rounds. Daily presentations should be focused on pertinent findings, data, and plan (ex: chronic/inactive problems, like BPH, do not need to be discussed).
- Write notes as below. Your attending should be your co-signer on these.
- Maintain and manage a “To do” list for your patients (following up with consults, labs, etc.) and provide updates on sign out rounds
- Be an advocate for your patient and a team player
- Read information pertinent to the care of your patient and incorporate into your care plan
- Take call with your team and admit patients

### Written presentations:

- Full Admission H&P
  - o HPI to include pertinent information from PMH, FMH, Social history, ROS; first sentence with only pertinent PMH
  - o A/P: 3-4 pertinent ddx, commit to 1, explain reasoning, testing and treatment plans explicitly
- Daily Progress Note
  - o A/P: Focus on the working diagnosis(es) and current clinical status, i.e. they should be updated daily and not serve as a historical account of the hospital course
- Notes should be in your own words (no copying and pasting of others’ content into your note) and completed early in the day.

\*If you would like more formal feedback on your notes (aside from what you receive from your ward attending), please feel free to email Dr. Logan or Dr. Ringwala to set up a time to review a note.

### Oral presentations:

- Admission presentation 5-10 minutes
  - o Practice and review with intern or resident
  - o Succinct focus on HPI and A/P; minimize commentary until assessment
  - o Physical exam – always include vital signs, general appearance, focused exam for chief complaint with pertinent positives and negatives
- Daily presentations 5 minutes
  - o Subjective – Focus on sxs relevant to presentation or new problems
  - o Objective – Vital signs; Focused exam with pertinent positives/negatives; labs – no subjective commentary in objective but do trend pertinent labs.
  - o A/P: Up-to-date; organized by diagnosis and prioritized by acuity/importance

